

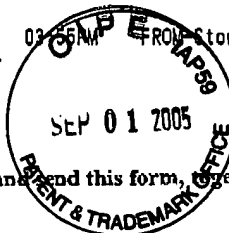
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FROM: StoutUxaBuyanMullins

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T-390 P.003/015 F-935



PART B - FEE(S) TRANSMITTAL

Received

JUN 6 - 2005

LEGAL PATENTS

Complete and send this form, together with applicable fee(s), to: Mail

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P.O. Box 1450
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

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06/01/2005

STEPHEN DONOVAN
LEGAL DEPT ALLERGAN INC TOWER TWO 7TH FLR
2525 DUPONT DRIVE
IRVINE, CA 926239534

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

JANET MCGHEE	(Depositor's name)
Janet McGhee	(Signature)
SEPTEMBER 1, 2005	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/371,354	08/10/1999	STEPHEN DONOVAN	17310	9137

TITLE OF INVENTION: METHOD FOR TREATING CARDIAC MUSCLE DISORDERS BY ADMINISTRATION OF A BOTULINUM TOXIN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$1400	09/01/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
BUNNER, BRIDGET E	1647	424-236100			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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1. Stout, Uxa, Buyan & Mullins, LLP
 2. Frank J. Uxa

3. GREG S. HOLLIGEL

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ALLERGAN, INC.

IRVINE, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

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5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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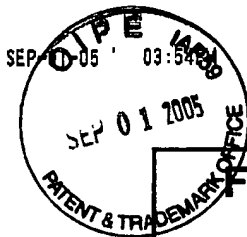
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T-390 P.002

F-935

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known																																																															
<input type="checkbox"/> Application claims small entity status. See 37 CFR 1.27		Application Number	09/371,354																																																														
TOTAL AMOUNT OF PAYMENT (\$)		Filing Date	8/10/1999																																																														
1400		First Named Inventor	DONOVAN																																																														
		Examiner Name	BUNNER, B.E.																																																														
		Art Unit	1647																																																														
		Attorney Docket No.	17310																																																														
METHOD OF PAYMENT (check all that apply)																																																																	
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<input checked="" type="checkbox"/> Deposit Account Deposit Account Number 01-0885 Deposit Account Name GREG S. HOLLRIGEL																																																																	
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WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2036.																																																																	
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1. BASIC FILING, SEARCH, AND EXAMINATION FEES																																																																	
<table><thead><tr><th rowspan="2">Application Type</th><th colspan="2">FILING FEES</th><th colspan="2">SEARCH FEES</th><th colspan="2">EXAMINATION FEES</th><th rowspan="2">Fees Paid (\$)</th></tr><tr><th>Fee (\$)</th><th>Small Entity Fee (\$)</th><th>Fee (\$)</th><th>Small Entity Fee (\$)</th><th>Fee (\$)</th><th>Small Entity Fee (\$)</th></tr></thead><tbody><tr><td>Utility</td><td>300</td><td>150</td><td>500</td><td>250</td><td>200</td><td>100</td><td></td></tr><tr><td>Design</td><td>200</td><td>100</td><td>100</td><td>50</td><td>130</td><td>65</td><td></td></tr><tr><td>Plant</td><td>200</td><td>100</td><td>300</td><td>150</td><td>160</td><td>80</td><td></td></tr><tr><td>Reissue</td><td>300</td><td>150</td><td>500</td><td>250</td><td>600</td><td>300</td><td></td></tr><tr><td>Provisional</td><td>200</td><td>100</td><td>0</td><td>0</td><td>0</td><td>0</td><td></td></tr><tr><td colspan="7">Subtotal (1)</td><td>0</td></tr></tbody></table>				Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Utility	300	150	500	250	200	100		Design	200	100	100	50	130	65		Plant	200	100	300	150	160	80		Reissue	300	150	500	250	600	300		Provisional	200	100	0	0	0	0		Subtotal (1)							0
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3. APPLICATION SIZE FEE																																																																	
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).																																																																	
<table><thead><tr><th>Total Sheets</th><th>Extra Sheets</th><th>Number of each additional 50 or fraction thereof</th><th>Fee (\$)</th><th>Fee Paid (\$)</th></tr></thead><tbody><tr><td>-100 =</td><td>/50=</td><td>(round up to a whole number)</td><td>x</td><td></td></tr><tr><td colspan="4">Subtotal (3)</td></tr></tbody></table>				Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)	-100 =	/50=	(round up to a whole number)	x		Subtotal (3)																																																			
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<input type="checkbox"/> Notice of Appeal: \$500 fee (\$250 small entity discount)																																																																	
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<input type="checkbox"/> Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount)																																																																	
<input type="checkbox"/> Request for Continued Examination: \$790 fee (\$395 small entity discount)																																																																	
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SUBMITTED BY																																																																	
Name (Print/Type)	GREG S. HOLLRIGEL	Registration No. (Attorney/Agent)	45,374	Telephone	949-450-1750																																																												
Signature				Date	9/1/05																																																												

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